



SPECIFIC COMPETENCIES IN DENTISTRIES ON PREVENTIVE ORAL TREATMENTS TO ONCOLOGICAL PATIENTS OF HEAD AND NECK

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ABSTRACT

The specific competencies of professionals in all disciplines, they are the ones that allow you to compete successfully in the labor field when they apply knowledge and skills in a relevant way, to respond correctly to the changes demanded by society, in different areas. For the area of health, specifically dentistry, the professional must apply or combine the "four knowledge" to develop a successful professional practice, which allows him to generate clinical competence. Because of the increase in the incidence of cancer patients worldwide that has been inevitable; as well as the sequelae that occur at the oral level when they undergo radiotherapy treatment at the head and / or neck level.

In the present investigation, the competencies that dentists currently have to perform preventive treatments for this group of the cancer population were quantified. The information was collected from the direct source (the Dentists), through a questionnaire-type instrument and an Unstructured, Evaluative interview. The most significant results of a population of 125 dentists interviewed from the city of Puebla in Mexico, it was found that only .88% have the skills in an excellent way, 52.52% do not have them to perform preventive treatments in the radiated patient. The main conclusion indicated that the specific competences of Dentists are very limited and all respondents showed interest in a permanent update on the subject.

KEYWORDS: Specific competencies, Oral sequelae, Preventive oral treatment, Head and neck radiation therapy.

INTRODUCTION:

The Introduction The skills that today's professionals must develop, especially those specific to their discipline, in order to respond effectively to problems by applying knowledge in the conceptual, procedural and attitudinal. It is currently important and relevant to know and analyze these concepts in the discipline of Dentistry, when analyzing the preventive treatments that these professionals currently perform in dental offices and clinics in the city of Puebla in Mexico, to the head and neck cancer population undergoing radiotherapy, for all the oral sequelae that this therapy generates as; Xerostomia, mucositis, radiation caries, tooth loss, and taste changes to mention some, which affect both this population both physically and emotionally and on many occasions, the patient stops feeding due to pain and burning mouth, which affects the immune system and allows the tumor process to grow faster, thus compromising your life.

At the same time, being a group of the population that is statistically increasing and demands quality of life during this process and is an important contributing factor, it is oral health. In the same way, they mentioned several authors among them, (De la Fuente, 2014)¹ where he says that: "The number of cancer cases has increased in the last decade and 15 million new cases are expected by 2020 worldwide."

In this sense, in the face of this new reality, where general practice dentists with professional practice in the city of Puebla, should be professionals with specific skills to perform dental treatments to this group of the population that is increasing. Reason why, it is important to know if these health professionals have these specific skills. Based on the Four Pillars. (Meza 2013)²:

Learn to know; combining a sufficiently broad general culture with the possibility of deepening knowledge in a small number of subjects.

To learn to do; in order to acquire not only a professional qualification but, more generally, a competence that enables the individual to face a large number of situations and to work in a team.

Learn to live together; developing the understanding of the other the perception of the forms of interdependence respecting the values of pluralism, mutual understanding and peace.

Learn to be; so that it strengthens its own personality and is able to work with increasing capacity for autonomy, judgment and personal responsibility. (pp, 19-21)

The evaluation of competencies is a significant learning and training experience, which is based on the determination of the achievements and aspects to be

improved in a person with respect to certain competence, according to agreed criteria and relevant evidence, within the framework of the performance of that person in carrying out activities and / or analysis, understanding and resolution of problems in the professional, social, disciplinary and research context, considering knowing how to be, knowing knowing, knowing how to do and knowing how to live together.

The evaluation of competencies "is made up of several characteristics, among them, the action before activities and problems of the context, which is present in the different evaluation strategies (written tests, interviews, performance tests, essays, role plays, etc.)" (Tobón, 2010, pp. 116-117)³.

OBJECTIVE:

Analyze the specific competencies in the General Dentists with professional practice responsible for a dental office or clinic in the city of Puebla, and the preventive oral treatments that are performed in the head and neck cancer patients undergoing radiotherapy

MATERIALS AND METHODS:

125 General Dentists with professional practice were selected randomly, from the center to the south including the east and west of the city of Puebla, graduated from the 11 different universities of the city of Puebla, regardless of the time of professional practice, only that were interested in participating in the project, with the following demographic data; Gender. Age. University of graduation Responsible for dental office or clinic.

The validated measuring instrument was used since 2014, which consists of closed reagents with 20 items, which generate the information of the respondents to measure their knowledge, skills and competencies in providing preventive treatments to the head and neck cancer patient who has undergone radiotherapy in its different phases. The instrument that meet the conditions of reliability and validity were used, which allowed inferences and interpretations of the research variables. A) Questionnaire with 20 closed questions and B) Type interview; Unstructured, Evaluative, Explanation of the action and Biographical. (Table 1)

The planning of the field work, was through a blog where it was organized as follows:

1. The dental offices and clinics were located. A first visit was made where they explained the objective of the project, if they agreed to participate, at that time the questionnaire was answered and the interview was carried out.
2. In other cases, they granted an appointment after the first visit, to partic-

ipate in the project. In the visit of the meeting with the professional, a friendly atmosphere was created, of respect and above all confidence to not generate discomfort, because there was talk of (knowledge, skills and values on the subject),

3. They were given the questionnaire and given a maximum time of 20 minutes to answer it, and then the interview was carried out.
4. The interview lasted from 35 to 40 minutes. The first questions were of the sociodemographic type to know the profile of the Dentist; followed by the interview body (the relevant questions that sought to answer the

objective and research question of the project, three clinical cases were simulated for the Dentist to develop the "know-how" preventive treatment), The recording of the interview was made only in those professionals who authorized it. And a typed onto was used as a simulator where they explained the preventive treatment and a conclusion; which allowed them to express their reflection on previous experiences in the consultation of radiated head and neck cancer patients,

In this way, the "know know, know how to do and know how to be" was evaluated.

Table 1: Information collection instrument (Questionnaire)

QUESTIONS	Ex	Very good	Good	Evil
1. Do you identify and know the general symptomatology of the patient undergoing head and / or neck radiotherapy?				
2. Do you know at what time the general symptomatology disappears when the patient has received head and / or neck radiotherapy?				
3. Do you think you are clear about the knowledge to identify the oral manifestations of the patient who is receiving or has received radiotherapy at the head and / or neck level?				
4. Do you think you are clear about the knowledge to indicate oral treatment to each of the oral manifestations at the level of oral mucosa of the patient who is receiving or has received radiotherapy at the level of head and / or neck?				
5. Do you consider having the knowledge to give correct integral dental care to the patient who will receive head and / or neck radiotherapy?				
6. Do you consider having the knowledge to give correct dental care to the patient who is receiving head and / or neck radiotherapy?				
7. Do you consider having the knowledge to give comprehensive dental care to the patient who has just completed head and / or neck radiotherapy?				
8. Do you consider having the knowledge to give correct dental care to the patient who received head and / or neck radiotherapy 3 to 6 months ago?				
9. Do you consider having the knowledge to give correct dental care to the patient who received head and / or neck radiotherapy 1 year ago?				
10. Do you consider having the knowledge to give correct dental care to the patient who received head and / or neck radiotherapy 2 years ago?				
11. Do you know at what time you can perform a dental extraction in the patient who is under the head and / or neck radiotherapy treatment or who has already completed it 9 months ago?				
12. Can you perform any dental Operative treatment on the patient who is under head and / or neck radiotherapy treatment?				
13. Do you know if you can perform any endodontic treatment in the patient who is under head and / or neck radiotherapy?				
14. Do you have the knowledge to perform any surgical treatment in the head and / or neck cancer patient who is under radiotherapy?				
15. Do you know at what time the oral symptoms disappear when the patient is already undergoing radiotherapy of the head and / or neck?				
16. Do you have clear knowledge to identify an oral cavity that has been treated by radiotherapy of the head and / or neck?				
17. Do you have the knowledge to be able to implement a comprehensive dental care protocol for the head and / or neck cancer patient before, during and after radiotherapy? Preventive and corrective?				
18. At what level do you think you have the clear knowledge to be able to refer or guide the head and / or neck cancer patient?				
19. Do you think that the teaching you received in your Faculty throughout your training was enough to be able to attend to a head and / or neck cancer patient?				
20. At what level do you think you have the knowledge to be able to get involved in multidisciplinary groups that provide comprehensive care to the head and / or neck cancer patient?				

Source: BUAP Rehabilitation Academy (2014)

RESULTS:

Based on the findings found, the results obtained by the interpretation of the statistical analysis carried out through the SPSS program.

A total of 2,500 responses were generated, distributed as follows, as shown in the Table 2.

As quantitative data were compared between four groups (Ex=10, VG=9, G=8, NG=5), the Variance Analysis test (ANOVA) was applied.

To organize the results of the interviews, reference was made as mentioned by (Hernández, Fernández and Baptista 2014)⁴. A simple technique is that of "grouping": first, write down topics related to the main approach of the interview, or, detected in the observations and documents. Then, group the most common (repeated over and over again), which are the most distinctive (closely related to the approach) and specifically which are rarely mentioned, the latter are discarded. Subsequently, group the topics. (p. 436) "Each interview is a

unique dialogue experience and there is no standardization" (p.460).

Based on the results obtained in this project, where I could read that the General Stomatologists with professional practice graduated from the different faculties of the city of Puebla, they do not have the specific competencies on dental care of the head and neck oncologic patients, that is, there is a direct relationship.

It is right that they did not receive a precise teaching on the subject, and very few events or courses are promoted (such as, congresses, continuing education courses, etc.) that lead to an update on the subject, which is why the minimum opportunity to attend this population in the private consultation.

The results show the need to strengthen programs to generate the competences that respond, both to professional knowledge based on the particularities of the oncological population, and to the development of the skills and abilities inherent in it; thus the graduate in Stomatology can have the precise knowledge, attitudes, values and competences, to preserve the oral health of the head and neck

cancer patient treated with radiotherapy, in a preventive manner in an appropriate way.

Table 2: Results in percentages

Results in percentages 125	Ex	VG	G	NG
2,500 answers	.88%	9.36%	37.24%	52.52%

Note. Percentages of the results for each category.

Source: selfmade. Estrada B. (2017).

Table 3: Grouping of answers by percentages and categories

	# Answers	%	Comments
Excellent = 10	22	0.88	They mentioned that they are: "excellently trained" to treat a head and neck cancer patient at any stage of radiotherapy.
Very Good = 9	234	9.36	They answered: "Very Good" by having knowledge to attend to this group of patients.
Good = 8	931	37.24	They said that: perform "Good" preventive treatments to cancer population..
NG = 5	1313	52.52	They replied that: "They do not have the knowledge" to perform oral preventive treatments for the cancer population in its different phases.

DISCUSSION:

The results of the present investigation coincide with what they mentioned particularly in the discipline of Stomatology; (Plasschaert 2004)⁷ when they mentioned that; "The Dentist must acquire the ability to achieve a series of competencies the essential skills to begin practicing as a dentist independently and without supervision. The competences in question are the attitudes, behaviors, knowledge and basic skills necessary for the graduate to respond to all the circumstances that arise in the general exercise of the profession. Consequently, with the results achieved, it is clear that Stomatologists must remain in continuing education programs, for a constant update that allows them to develop professional competencies that are responding to the demands of the stomatological population and can remain at the forefront of development discipline".

CONCLUSIONS:

The reality that general stomatologists face in response to the demand for dental consultation due to the growth of the cancer population, and based on the results obtained, denotes that; their specific competences are very limited and all those evaluated showed interest in a permanent update on the subject, therefore, in the present investigation:

The following are proposed:

1. the thematic contents of the subjects of the programs in the universities must be updated.
2. In the various civil organizations as they are; Associations and Colleges, within their continuing education programs, design annual congresses, etc., implement the thematic content that they update to professionals on preventive oral treatments for patients with head and neck cancer undergoing radiotherapy.

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